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55-04
PATENTS

Attorney Docket No. 593/004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT APPLICATION

Applicants : Thomas E. Borillo, et al.
Application No. : 09/932,512 Confirmation No.: 6335
Filed : August 17, 2001
For : EXPANDABLE IMPLANT DEVICES FOR
FILTERING BLOOD FLOW FROM ATRIAL
APPENDAGES
Group Art Unit : 3731
Examiner : Victor Nguyen

RECEIVED
JAN 02 2004

TECHNOLOGY CENTER R3700

New York, New York 10020
December 24, 2003

Hon. Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

AMENDMENTS AND REPLY TO OFFICE ACTION

Sir:

In response to the September 29, 2003 Office Action, applicants amend the above-identified application and respectfully request reconsideration and allowance as follows:

Amendments to the Specification begin on page 3 of this paper.

Amendments to the Claims are reflected in the listing of claims which begin on page 4 of this paper.

Appl. No. 09/932,512

Amendments & Reply to Office Action dated December 24, 2003

Remarks begin on page 14 of this paper.



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EXPRESS MAIL CERTIFICATION

"Express Mail" mailing label number EI124988808US.

Date of Deposit December 24, 2003.

I hereby certify that this transmittal letter and the other papers and fees identified in this transmittal letter as being transmitted herewith are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and are addressed to the Hon. Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.


Lilian Garcia

TRANSMITTAL LETTER

Sir:

Transmitted herewith is an Amendment And Reply to Office Action in the above-identified patent application.

FEE FOR ADDITIONAL CLAIMS

[X] A fee for additional claims is not required.

[] A fee for additional claims is required.

The additional fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE		ADDITIONAL FEES
TOTAL CLAIMS	15	-	49	* =	0	X	\$ 18	=	\$ 0
INDEPENDENT CLAIMS	2	-	10	** =	0	X	\$ 86	=	\$ 0
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM						+	\$ 290	=	\$ 0
									TOTAL
									<u>\$ 0</u>

* If less than 20, insert 20.
** If less than 3, insert 3.

[X] The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

Respectfully submitted,



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